

The Public Health Experiences of Dr. C. Everett Koop

by  
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It has been claimed that C. Everett Koop is not qualified to be Surgeon General because of his lack of Public Health experience. Obviously, those making such judgments are unfamiliar with his long and productive work in the Public Health area. Dr. Koop has stated that it was the delivering of babies in their homes in Harlem more than forty years ago that prompted his first interest and subsequent activities in Public Health. They continued throughout the early years of pediatric surgical practice at the old Children's Hospital of Philadelphia and they remain to this day.

From 1960 to 1980, Dr. Koop was vice president for four terms and a board member of MAP International, a relief agency located in Wheaton, Illinois. MAP International started as the Medical Assistance Programs providing medicines and material for doctors working in Third World countries but as MAP's understanding of needs increased and as sanitation, water supply, sewage disposal, famine control, etc., became part of its services, the name was changed to MAP International. This organization has a relationship with American and national physicians in eighty-three countries.

The wholesale value of goods shipped by MAP International overseas is now in excess of \$200,000,000. Eight years ago, representing MAP International, Dr. Koop procured from DeWitt Wallace of the Readers' Digest \$1.2 million in the form of a ten year irrevocable trust to fund 75% of the transportation of third-year medical students in the United States and Canada to visit bush-type hospitals in Third World countries for a minimum period of ten weeks. Dr. Koop has chaired the MAP Readers' Digest International Fellowship Committee for all of these years and has been instrumental in sending about 750 medical students abroad for this experience. The reward of this effort is now beginning to be seen because those early medical students have completed their schooling, have taken their internships and have gone on to specialty training including additional time in schools of Public Health. They are now returning to Third World countries for careers in international medicine.

Dr. Koop's activities in the Public Health sector are numerous. In 1960 he made trips to Egypt, Ethiopia, Kenya, Uganda, Tanzania, Belgian Congo (Zaire), South Africa, Nigeria and Ghana for the purpose of acquainting medical missionaries of American and other origins of the availability of the service of MAP International. Much of this trip was undertaken by flying from bush hospital to bush hospital in a Piper Cub to assess the needs of people in what is now called the Third World.

While on this trip, Dr. Koop represented the State Department of the United States and was successful in convincing the Ministry of Health of Ghana to build an American medical school in Accra while it was receiving bids from three countries behind the Iron Curtain. On his return, Dr. Koop negotiated the procurement of faculty for that medical school. He sought and secured agreement from the College of Physicians of Philadelphia, the non-profit corporation that accepted the obligation to oversee our government's commitment to Ghana. The project was completed when each department and division of the medical school had been turned over to a Ghanaian national director.

Dr. Koop's report on his African experience stimulated a request from the United States and Canada to survey several hospitals in Japan that were being supported largely by American money. Dr. Koop then negotiated with the Refugee and Migration Service of the United States State Department for the building of the Evangel Hospital in Hong Kong and on his return raised additional money privately for equipping the operating rooms of that institution. Students from the MAP International Readers' Digest International Fellowships have periodically been sent there and Dr. Koop has returned to that institution six times since it was built.

In 1964, at the request of the Ministry of Health of the Dominican Republic, Dr. Koop set up nine hydration stations for treatment during an epidemic of dysentery where the mortality was in excess of 70 percent. Then with the aid of the Dominican Ministry of Health, Dr. Koop mobilized a group of local physicians to carry out the intravenous medication and procured intravenous fluids flown in by the United States Navy from Panama. After the epidemic had been controlled, the physicians who participated continued to work in a non-profit capacity as part-time physicians providing acute care, nutritional consultation, and other services.

In 1965, Dr. Koop visited European and Asian Fellows who had been previously trained by him at The Children's Hospital of Philadelphia. He lectured in medical schools and operated on patients by teaching hospitals in Greece, Iran, Thailand, the Philippines, Taiwan, Japan and Hong Kong.

In 1972, there was the beginning of a bilateral relationship between The Children's Hospital of Philadelphia and the Children's Hospital in Krakow, Poland, an institution which is a gift of the American people to the people of Poland. Dr. Koop trained the Surgeon-in-Chief first and his assistant and arranged for the

training of their chief of Anesthesiology at Philadelphia's Children's Hospital. This work has gone on so that at the present time staff of the Children's Hospital provide the respiratory therapy and intensive care for the extensive open heart surgical program at that institution in Poland.

In 1976, Dr. Koop met with the Minister of Health of Poland as well as the President of that country to urge the use of funds provided to Poland by the United States for the conquering of surgical disease as well as medical problems already being cared for.

For more than ten years, Dr. Koop was the only American on the Council of the British Association of Paediatric Surgeons, which provided the basis for annual international congresses of pediatric surgeons from all over the world. As a result he has been Visiting Professor or Lecturer (sometimes on an annual basis for three or four years in succession) in Liverpool, Stockholm, Bremen, Amsterdam, Rotterdam, Katmandu, Jerusalem, Oslo, Copenhagen, Johannesburg, Barcelona, Madrid, Rome, Zurich, Geneva, Lausanne, Marseille, Abadan, Toronto and Mexico City. His teaching has enabled physicians in these countries to provide better health care to their people.

One of the most beneficial aspects of Dr. Koop's involvement with other countries has been the visits by surgeons from these

countries to The Children's Hospital of Philadelphia for retraining in pediatric surgery. According to the new Administration, updating of medical knowledge is the goal of many of the international programs of the Department of Health and Human Services at this very time.

Preceding all of the above and continuing to the present time, Dr. Koop has had an interest in the tribe of Tarascan Indians in Southwest Mexico. He was stimulated to do this by the essential lack of medical care except in those few parts of the tribal lands where they were contiguous with Mexican towns in his early years of association with them. He has encouraged other physicians to go to the tribe periodically during their vacations and to provide diagnosis and suggested treatment for this group of 70,000 people. Dr. Koop arranged in that tribe many years ago a series of small dispensaries with local staff trained by the American physician volunteers.

His import on the American health care scene has been equally dynamic. Beginning with Dr. Koop's association with the then developing specialty of pediatric surgery (he was the sixth person in America to devote his surgical skills to children alone) he had the opportunity to assess the underlying causes for the unbelievably high mortality of children undergoing surgical procedures.

His pioneering in and support of others in developing pediatric anesthesiology has helped make anesthesia safe for children. The mortality of newborn surgical procedures for many congenital defects has been turned around; survival rates that were under 10 percent are now over 90 percent, a complete reversal.

When Dr. Koop began his surgical odyssey, many pediatricians scoffed at the idea that cancer was a Public Health problem in children. He kept hammering away at that concept, developing new surgical techniques as he went, proving that better survival was possible.

Dr. Koop's work has been the essence of Public Health.